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SD Secretary of State

STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Madison Daily Leader		2. DATE: 9/28/2023
3. FREQUENCY OF ISSUE: Monday- Friday	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 260	3B. ANNUAL SUBSCRIPTION PRICE: $ 147.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): PO Box 348 Madison, Lake County, SD 57402-0348		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): PO Box 348 Madison, SD 57402-0348		
6. FULL NAME OF PUBLISHER: Paul Hunting		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: Wick Communications	COMPLETE MAILING ADDRESS: 333 W Wilcox Dr. Suite 302 Sierra Vista, AZ 8	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	1582	1519
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	257	239
2. Mail Subscription (Paid and or requested)	1167	1135
3. Paid Electronic Copies	138	170
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	1475	1420
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS		
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES		
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	1475	1420
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	87	88
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1582	1519

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public
I swear that the statements made by me are true, correct, and complete:

(Signature)

General Manager
(Title)

State of South Dakota)
County of Lake)

Sworn to before me this 7th day of November 20 23

Ashley Jaton
Notary Public

(Seal)

ASHLEY JATON
NOTARY PUBLIC
SOUTH DAKOTA

My commission expires: 5-27-2026

Form: SOS REC 051 9/2016